

I said: I suppose. I hear it over and over again, if we could just buy policies across State lines.

They laughed. They said: Do you know what is going to happen? Do you know what happens when you buy insurance in Illinois and they tell you the hospitals and doctors who are eligible? You certainly want to have doctors in your home area eligible who may not be eligible under an Alabama plan. That makes sense.

Secondly, they said: If people outside the State who are truly sick start buying into Alabama to get lower premiums, the premiums are going to go up. They are going to engineer the risk pool to make sure that it is viable.

That is a notion that they rejected out of hand. I asked them about health savings accounts. That is another thing you hear over and over again. If people could just set aside nontaxable income and leave that in a pool of money to pay their copayments and other expenses, then there would be a disincentive to overutilize health care. These administrators said: But people who are living paycheck to paycheck don't have money to set aside—even non-taxable money to set aside at that point—and, ultimately, many of them would put off care they desperately need until they become even sicker.

Each one of these approaches has its critics. There are people who think we ought to look at it more carefully. I think that ought to be the bottom line. To my Republican majority, look at this carefully. It is not a matter of keeping a campaign promise; it is a matter of keeping a promise to the people you represent not to leave our health care system in chaos.

I hope President Trump and my congressional Republican colleagues are listening to what my constituents back home told me yesterday, things that they will hear themselves if they will go back home and listen to people who run the hospitals in the communities where the voters they represent live.

I wish to conclude with a quote on the subject from Dr. William Gorski, president and CEO of SwedishAmerican, who wrote to me. He said:

I must also speak forcefully as a former practicing physician. Irrespective of any financial impact of repeal, real lives are at stake here. President Obama's vision recognized a great understanding of the importance of health care access to the quality and outcomes of care. Any diminishment of this access threatens the health and well-being of millions of our fellow citizens. . . . My strong view is that rather than repealing the ACA, we should be looking for ways to refine and expand it.

That comes from a doctor. I solicited his view. I don't know him personally, but it represents the feelings of many.

Mr. President, I ask unanimous consent to have printed in the RECORD the State Journal-Register article from Springfield, IL, on my meeting yesterday.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

[From the State Journal-Register, Jan. 23, 2017]

DURBIN HEARS HOSPITALS' CONCERNS ABOUT OBAMACARE REPEAL
(By Dean Olsen)

Executives from Springfield-area hospitals and health systems told U.S. Sen. Dick Durbin Monday morning that a threatened repeal of the Affordable Care Act by Congress would jeopardize local patients' access to medical services and harm their organizations' finances.

"We'd just hate to see this go away," Memorial Health System chief executive officer Edgar Curtis said of the law, also known as Obamacare, during a meeting at the Memorial Center for Learning and Innovation with Durbin and leaders from other hospitals.

Tina Casner, chief executive officer of Pana Community Hospital in Christian County, said Illinois' expansion of Medicaid eligibility—funded by the ACA—and reduced-price private insurance sold through the state's health insurance exchange have reduced the number of uninsured patients and improved the 25-bed hospital's bottom line.

"There are now folks in our community who are seeking that care," she said.

Durbin, D-Springfield, said he doubted that congressional Republicans pledging a comparable replacement of the ACA would be able to fulfill their promise without big gaps in coverage for many Americans.

Instead of "repeal and replace"—the plan for the ACA supported by local congressmen Rodney Davis, R-Taylorville, and Darin LaHood, R-Dunlap—Curtis said he is "very afraid" that Congress instead will "repeal and delay" a decision on a permanent replacement.

Action to repeal without a replacement is likely to cause disruptions in care because more insurance companies would pull out of the exchange and increase the prices of plans even more, health-care industry officials have said.

Durbin, the No. 2 Democrat in the U.S. Senate, was told by hospital administrators that the federal law isn't perfect and needs to be tweaked, especially when it comes to the high cost of private coverage and excessive paperwork.

"I'm for that," he said.

But he and the administrators expressed concerns about Republicans' plans to change Medicaid from a federal entitlement program to a block grant given to individual states as a way of getting control of Medicaid's rising cost to the federal government.

The Illinois Health and Hospital Association has said block grants for Medicaid could lead to reductions in funding in Illinois, a state that already spends less per Medicaid patient than almost all other states.

Dr. Jerry Kruse, dean and provost of Southern Illinois University School of Medicine, said the expansion of Medicaid eligibility "has been really great for us."

The expansion has decreased the uninsured rate by 80 percent for patients of SIU's federally subsidized outpatient primary care clinic, the SIU Center for Family Medicine, he said.

With insurance coverage, formerly uninsured patients are less likely to worry about incurring medical bills they can't afford to pay and more likely to seek care, Kruse said.

"It's that peace of mind," he said.

DACA

Mr. DURBIN. Mr. President, it was 16 years ago when I introduced the DREAM Act. The DREAM Act was a response to a call I received in my office. A young woman had been brought

to the United States as an infant, at the age of 2, from Korea. She lived in the United States and grew up here. When she became an accomplished pianist and was accepted at some of the best musical schools in the Nation, she started to apply but didn't know what to put down in terms of her citizenship. She called and asked, and it turned out that her mom and dad had never filed the papers that would have allowed her to become a citizen of the United States. She was undocumented. Through no fault of her own—brought to the United States—her papers weren't filed.

She grew up in Chicago, went to school, and did well, despite having a family of modest means. As I said, she developed a skill as a pianist and now had an opportunity of a lifetime and wanted to know what her legal status was. We checked the law, and it was pretty clear. She was undocumented, and the laws of America said you have to leave for 10 years, go outside of the United States, and petition to come back.

It didn't seem fair or reasonable that a child, an infant of 2, would be held responsible for mistakes made by their parents, so I introduced the DREAM Act. The DREAM Act said that if you are one of those kids and you finish school and you don't have a serious criminal record, we will give you a chance—a chance to become legal in America, a chance to become a citizen.

Those kids grew up going to school in our classrooms, pledging allegiance to that same flag we pledge allegiance to. They believed they were Americans, but it was not so in the eyes of American law.

I introduced this bill 16 years ago. It passed the Senate in one form, the House in another. It has never become the law of the land. A few years ago I wrote to President Obama and said: As President, can you find a way to protect these young people until we do what we are supposed to do in Congress?

He did. He created something called DACA. By Executive order, these young people could apply, pay about \$500 in a filing fee, go through a criminal background check, and if they had no problems—no threat to this country—be allowed to stay here on a temporary 2-year basis. They could go to school but with no Federal help, no Federal assistance for their education. They could work and renew it every 2 years. That is DACA.

Over 750,000 kids signed up. These were kids just like the one I described earlier—now young people who are going to college and doing important things with their lives. I have come to the floor over 100 times to tell their stories because political speeches, as inspiring as they are, usually don't move people. When you hear about these people and who they are, it can make a difference.

I want to introduce one today. It will just take a few minutes. I see a couple of my colleagues on the floor.

This is Belsy Garcia Manrique. When Belsy was 7 years old, she was brought by her family to the United States from Guatemala. She grew up in a small town in Georgia and became an extraordinary student. She graduated third in her high school class with a perfect 4.0 grade point average.

During high school, she was a member of the National Honor Society, was on the tennis team, and was a member of the mock trial team. She even earned a black belt in Tae Kwon Do. She went on to attend Mercer University in Macon, GA, where she was a Presidential scholar for 4 years. This award is given to students in the top 10 percent of their class.

Belsy was a member of a number of academic honor societies and the pre-med club. She worked as a researcher in their biology department. She was a leader of her college's Habitat for Humanity chapter and worked as a resident assistant in the student dorms and a tutor for high school students.

In 2013, Belsy graduated from Mercer University with a bachelor of science degree in biology, with minors in chemistry and math. She is now in her second year at the Loyola University Chicago School of Medicine. That is where I met her.

Like many States across the country, my home State of Illinois faces a shortage of physicians in the inner cities and in the downstate rural communities. As a DACA student at Loyola medical school, Belsy has promised that after she graduates and becomes a doctor, she will work for several years in underserved areas in my home State of Illinois.

Even with her busy medical school schedule, Belsy volunteers as a translator at Loyola medical clinic. She is a member of Viva la Familia, a group which educates families on healthy lifestyles, and she mentors undergraduate students who are interested in medical school.

She wrote me a letter and said:

DACA means the world to me. It has allowed me to continue the arduous journey of becoming a physician, and without it, I would not be where I am today. All I've ever wanted was the opportunity to prove myself and to further my education so that I can give back to those who need it the most. I am so close to achieving my dreams and finally making a difference in the community, but if DACA is repealed, those dreams might never become reality.

If DACA is eliminated, what happens to Belsy? If it is eliminated, she loses her right to legally work in the United States and may have to drop out of medical school, and that alone—the clinical experience in medical school—requires actually working. If she can't work, she can't pay for her education.

Aside from State of Illinois financing opportunities, Belsy doesn't qualify for a penny in Federal assistance to go to medical school. It is an extraordinary hardship on these students, but they are so darned determined, they do it anyway.

I have been encouraged recently because statements made by President

Trump, as well as yesterday his press secretary and earlier in the day his chief of staff, lead me to believe that he understands the seriousness of this problem.

Young people like Belsy, thousands of them across the United States, are simply asking for a chance to have a good life, to make this a better nation. We could use her. We could use her medical services and talents as a doctor in my State of Illinois, in the State of Texas, in the State of North Dakota, and virtually every State of the Union. Why would we want to lose a great potential doctor like her? We need her, and we need people like her.

I hope my colleagues and President Trump will join me to continue the DACA program. I hope this administration will work with Congress to pass the BRIDGE Act, a bipartisan bill I have introduced with Senator LINDSEY GRAHAM to create a transition for those like Belsy, protected by DACA, so that until this Congress—as it should—passes comprehensive immigration reform, we would protect these young people from deportation.

Mr. President, I yield the floor.

The PRESIDING OFFICER (Mr. CRUZ). The Senator from North Dakota.

Mr. HOEVEN. Mr. President, I ask unanimous consent that I be allowed 5 minutes to make comments but also that my colleague from North Dakota be allowed to make comments, as well, and that we be allowed to complete those comments prior to the afternoon recess.

The PRESIDING OFFICER. Without objection, it is so ordered.

HONORING DEPUTY SHERIFF COLT EUGENE ALLERY

Mr. HOEVEN. Mr. President, I rise today to honor the service and sacrifice of Colt Eugene Allery, a sheriff's deputy in Rolette County, ND, who was killed in the line of duty on January 18. Deputy Allery was just 29 years old and leaves behind his fiancée, Alexandria, his four children and stepdaughter, along with many family and many friends.

Deputy Allery was dedicated to serving the public and spent the last 5 years working in law enforcement. He started his career as a corrections officer, serving as a police officer in Rolla, ND, and as a tribal police officer for the Turtle Mountain Band of Chippewa Indians, a tribe of which he was a member.

He became a deputy with the Rolette County Sheriff's Office just 3 months ago. His colleagues remember him for his friendly and positive disposition and his commitment to making his community and our State safer. He was also well known in St. John, the tight-knit community where he was raised by his grandparents. He was known for always serving his friends and his family. They say Colt was happiest when he was doing things for others, which is

why he chose law enforcement as his career.

Deputy Allery's life is a reminder to each of us of the enormous debt we owe to all of the men and women in law enforcement who leave home every day and go to work to protect us and help make our communities and our States safer places—places that we are proud to call home.

My wife Mikey and I extend our deepest condolences to Deputy Allery's family and friends during this difficult time. Our thoughts and prayers are with his loved ones and his law enforcement colleagues, in the coming days and months and especially today, as Deputy Allery is laid to rest. May God bless him and his family.

Mr. President, I yield the floor and turn to my colleague from North Dakota.

The PRESIDING OFFICER. The Senator from North Dakota.

Ms. HEITKAMP. Mr. President, I come here again today on what is a sad day and really a sad week for law enforcement in North Dakota, for the community of the Turtle Mountain Band of Chippewa, and certainly for the family of Colt Eugene Allery.

Colt was a deputy in the Rolette County Sheriff's Office who tragically lost his life in the line of duty last Wednesday night near Belcourt, ND. Colt joined in a high-speed chase with several fellow officers Wednesday evening after a report and identification of a stolen vehicle. As the stolen vehicle was coming to a forced stop, shots were fired, and the call came over the radio that shakes all of North Dakota law enforcement and our entire State to the core: "Officer down."

Colt never got back up that evening, succumbing to his injuries not very far from the small community where he grew up. He leaves behind five beautiful young children, including a stepdaughter; his fiancée, Alexandria; his grandparents, Gene and Rita Allery, who raised him; his family, his friends, and a community that will miss his constant smile and playful attitude.

He also leaves behind his fellow deputies and colleagues in the Rolette County Sheriff's Office. I know this is an incredibly tough time right now for Rolette County Sheriff Medrud and his deputies as well. I know that the people across the State of North Dakota and I have your back during this difficult time.

This is now the second time in less than a year that I have come to the floor of the U.S. Senate to talk about the heroism and service of one of North Dakota's peace officers—one of those peace officers who made the ultimate sacrifice in the line of duty.

It is heartbreaking to have to stand here yet again to make one of these speeches in recognition of a North Dakota peace officer. In fact, during my 8 years as North Dakota's attorney general, I saw two deaths, two violent deaths of peace officers in my State. In less than a year, we have two.